## PATENT APPLICATION FEE DETERMINATION RECORD

Application or Docket Number

Effective October 1, 2003

(0/692,045

CLAIMS AS FILED - PART I SMALL ENTITY OTHER T											THAN		
1		. <u>.</u>	(Column 1)		(Column 2)		1	TYPE [		OR	SMALL	ENTITY	
TOTAL CLAIMS			52					RATE	FEE		RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	385.00	OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			5∂minus 20=		• 32			X\$ 9=		OR	X\$18=	576.00	
INC	DEPENDENT CI	LAIMS	4 minus 3 =		*			X43=		OR	X86=	86.00	
ML	ILTIPLE DEPEN	NDENT CLAIM PI				+145=		OR	+290=				
* If the difference in column 1 is less than zero, enter "0" in column 2							Į	TOTAL		OR		1432.4	
l	3-13-05 c	LAIMS AS A	MENDED					SMALL	ENITITY	OR	OTHER SMALL	THAN	
-	<del></del>	(Column 1) CLAIMS		(Colun		(Column 3)	) 7 (*	SINALL			JIIALL		
AMENDMENT A		REMAINING AFTER AMENDMENT		NUMI PREVIO	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	. 58	Minus	<b>**</b> 5°	2	= 6		X <del>\$ 0-</del>		OR	X\$ <del>18</del> =	300,	
	Independent	* 4	Minus			=		х <del>43-</del>		OR	X <del>06-</del> 0		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							/8 0 + <del>145=</del>		OR	360 + <del>290</del> ≈		
٠											300.		
• •		(O.)	ADDIT. FEE OF ADDIT. FEE OF ADDIT. FEE OF ADDIT. FEE										
AMENDMENT B	<del>,                                    </del>	(Column 1) CLAIMS		(Colur HIGH		(Column 3)	)   			 1			
	·	REMAINING AFTER AMENDMENT		NUMI PREVIO PAID	BER	PRESENT EXTRA		·RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total .	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	A	Minus	<del>this</del>		-		X43=		OR	X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT			CLAIM		▋▐	. 4.45			.000			
							L	+145=		OR	+290=		
						•	A	TOTAL ODIT. FEE		OR	TOTAL ADDIT. FEE	<u> </u>	
		(Column 1)		(Colur	nn 2)	(Column 3)	<u>L</u>						
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT	_	HIGH NUMI PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus .	##		=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		=		X43=		OR	X86=		
4	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									On			
		mn 1 is less than th					. L	+145=		OR	+290= TOTAL		
***	**If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												